



TOWN OF ASHBURNHAM
Fire/EMS/Emergency MGMT. Department
99 Central Street
Ashburnham, Massachusetts 01430



Robert M Plant
CHIEF OF DEPARTMENT

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(978) 827-4021x803
(978) 827-4111 FAX

Burn Permit #2022-_____ Fee: \$25.00 Issue Date:_____ Agricultural _____ Residential _____

By the authority of Section 13 of Chapter 48 of the Massachusetts General Laws and by authority of 310 CMR Chapter 7 paragraph 7:07 of the Department of Environmental Protection (DEP) regulations and in accordance with the regulations of the Central Massachusetts Air Pollution Control District, permission to burn, tree branches, brush, cane, driftwood and forest debris, in the open air, is hereby granted to:

Name:_____ Tel # _____

Address:_____

Specific location of burning:_____

1. The person holding the permit shall have sufficient manpower and fire controlling equipment available at all times during burning.,
2. This permit does not release the holder from liability for any damages.
3. Seasonal brush permits are valid for the 2021 burning season **only, January 15 through May 1.**
4. Burning is allowed only between the hours of **10:00 am and 4:00 pm.**
5. Smoke minimizing starters shall be used, **i.e. kerosene, #2 fuel, or diesel fuel.**
6. The fire **shall be attended at all times!**
7. The fire shall not cause a nuisance to the public. Complaint from the public **may** be cause for termination of the permit.
8. The holder of this permit shall call the fire department dispatcher at **978-827-5714 x600** prior to starting any fire for permission to burn each day he/she wishes to burn. **No calls after 1:00 pm.**
9. The permit holder agrees to the conditions stated above and agrees to make this permit available to any Ashburnham Fire Department officer upon demand.
10. **No burning of stumps, logs or leaves.**
11. Any violation of the open burning laws will result in immediate revocation of this permit.
12. *Agricultural permits are valid on a yearly basis January to the end of December. Applicant must present proof of farm registration.*

Burn Permit #2022-_____ (Fire Dept. Copy) Issue Date:_____

Name:_____ Tel # _____

Address:_____

Specific location of burning:_____

I have read and agree to the conditions of this permit _____
(Signature of applicant)

Issued by: _____
(Dispatcher signature)

Approved by: _____ (Agricultural only)
(Fire Department)